

05/87/01

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.

1031/1

First Inventor

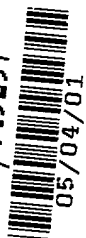
Robert Miles Saunders

Title

INVESTMENT STYLE LIFE INSURANCE PRODUCT THAT ...

Express Mail Label No.

EK973404235US

PTO  
09/849297

05/04/01

## APPLICATION ELEMENTS

See MPEP chapter 500 concerning utility patent application contents.

ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, D.C. 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification (Total Pages 27)  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) (Total Sheets 5)
5. Oath or Declaration (Total Pages 3)
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other.

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

Prior application information:

Examiner

Group / Art Unit

FOR CONTINUATION OR DIVISIONAL APPS ONLY: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 6b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Labelor ☐ Correspondence address below

(Insert Customer No. or Patent No. code (add here))

Name

27774

PATENT TRADEMARK OFFICE

Address

City

State

Zip Code

Country

Telephone

Fax

Name (Print/Type)

Michael P. Fortkort

Registration No. (Attorney/Agent)

35,141

Signature

Michael P. Fortkort

Date

5/4/01

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

## Complete if Known

Application Number	Unassigned
Filing Date	Filed Herewith
First Named Inventor	Robert Miles Saunders
Examiner Name	Unassigned
Group Art Unit	Unassigned
Attorney Docket No.	1631/1

TOTAL AMOUNT OF PAYMENT \$702.00

## METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **50-1047**

Deposit Account Name **Mayer Fortkort & Williams**

- ☒ Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

- ☒ Applicant claims small entity status. See 37 CFR § 1.27

2. ☐ Payment Enclosed:  
☐ Check ☐ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Code (\$)	Small Entity Code (\$)	Fee Description	Fee Paid
101 710 201 355		Utility filing fee	355.00
106 320 208 160		Design filing fee	
107 480 207 245		Plant filing fee	
108 710 208 355		Reissue filing fee	
114 150 214 75		Provisional filing fee	
SUBTOTAL (1)			355.00

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
23	3	9.00	27.00
10	7	40.00	289.00
Multiple Dependent: =			

Large Entity Code (\$)	Small Entity Code (\$)	Fee Description	Fee Paid
103 18 203 9		Claims in excess of 20	
102 80 202 40		Independent claims in excess of 3	
104 270 204 135		Multiple dependent claim, if not paid	
109 80 209 40		** Reissue independent claims over original patent	
110 18 210 9		** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			3307.00

\*or number previously paid, if greater. For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130 205 65		Surcharge - late filing fee or oath	
127 50 227 25		Surcharge - late provisional filing fee or cover sheet	
139 130 139 130		Non-English specification	
147 2,520 147 2,520		For filing a request for ex parte reexamination	
112 920* 112 920*		Requesting publication of SIR prior to Examiner action	
113 1,840* 113 1,840*		Requesting publication of SIR after Examiner action	
115 110 215 55		Extension for reply within first month	
116 390 218 195		Extension for reply within second month	
117 890 217 445		Extension for reply within third month	
118 1,380 218 695		Extension for reply within fourth month	
128 1,890 228 845		Extension for reply within fifth month	
119 310 219 155		Notice of Appeal	
120 310 220 155		Filing a brief in support of an appeal	
121 270 221 135		Request for oral hearing	
138 1,510 138 1,510		Petition to Institute a public use proceeding	
140 110 240 55		Petition to revive - unavoidable	
141 1,240 241 620		Petition to revive - unintentional	
142 1,240 242 620		Utility issue fee (or reissue)	
143 440 243 220		Design issue fee	
144 600 244 300		Plant issue fee	
122 130 122 130		Petitions to the Commissioner	
123 50 123 50		Processing fee under 37 CFR § 1.17(q)	
126 180 126 180		Submission of Information Disclosure Statement	
581 40 581 40		Recording each patent assignment per property (times number of properties)	40.00
148 710 246 355		Filing a submission after final rejection (37 CFR § 1.129(a))	
149 710 249 355		For each additional invention to be examined (37 CFR § 1.129(b))	
179 710 279 355		Request for Continued Examination (RCE)	
169 900 169 900		Request for expedited examination of a design application	
Other fee (specify)			

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$40.00

## SUBMITTED BY

## Complete if applicable

Name (Print/Type)	Michael P. Fortkort	Registration No. (Attorney/Agent)	35,141	Telephone	703-435-9390
Signature	<i>Michael P. Fortkort</i>	Date	5/4/01		

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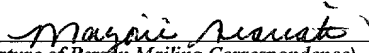
**CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)**Applicant(s): **Robert Miles Saunders**

Docket No.

**1031/1**Serial No.  
UnassignedFiling Date  
Filed HerewithExaminer  
UnassignedGroup Art Unit  
Unassigned**Invention: INVESTMENT STYLE LIFE INSURANCE PRODUCT THAT ALLOWS CONSUMER TO CONTROL AND REPLACE INDIVIDUAL POLICY COMPONENTS**I hereby certify that this **New U.S. Patent Application***(Identify type of correspondence)*

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under  
37 CFR 1.10 in an envelope addressed to: The Assistant Commissioner for Patents, Washington, D.C. 20231

on 5/4/01  
*(Date)*

**Marjorie Scariati***(Typed or Printed Name of Person Mailing Correspondence)*  
*(Signature of Person Mailing Correspondence)***EK973404235US***("Express Mail" Mailing Label Number)***Note: Each paper must have its own certificate of mailing.**